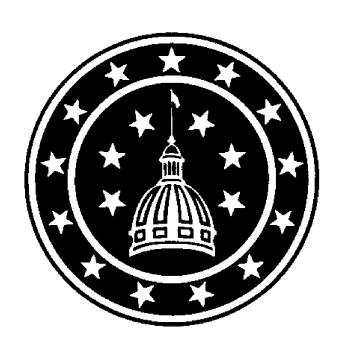
FINAL REPORT OF THE FAMILY AND SOCIAL SERVICES EVALUATION COMMITTEE



Indiana Legislative Services Agency 200 W. Washington St., Suite 301 Indianapolis, Indiana 46204-2789

November, 1998

Family and Social Services Evaluation Committee

Membership Roster

<u>Senators</u>	<u>Representatives</u>
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Senator Anita Bowser Representative Tim Brown Michigan City Crawfordsville

Senator Allie Craycraft Representative Vern Tincher Selma Riley

Senator Luke Kenley Representative Dean Young
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Barry Brumer Attorney for the Committee

A copy of this report is available on the Internet. Reports, minutes, and notices are organized by committee. This report and other documents for this Committee can be accessed from the General Assembly Homepage at http://www.state.in.us/legislative/.

I. STATUTORY AND LEGISLATIVE COUNCIL DIRECTIVES

The Indiana General Assembly enacted legislation (SEA 76-1997) establishing the Family and Social Services Evaluation Committee and directing the Committee to: (1) review issues relating to the organization, delivery, and administration of family and social service programs; and (2) examine the organizational structure of the Office of Family and Social Services (FSSA) to determine whether that structure facilitates the delivery of client services.

The Legislative Council assigned the following additional responsibilities to the Committee in 1997: (1) study the feasibility of establishing homeless shelters and the funding of homeless programs; (2) study child labor laws; and (3) study various issues concerning children, particularly a system of integrated funding and comprehensive policy.

II. INTRODUCTION AND REASONS FOR STUDY

The Family and Social Services Evaluation Committee was originally established in 1995 as part of the General Assembly's role in evaluation and oversight of agencies and programs as provided in IC 2-5-21. The Committee was reestablished by SEA 76-1997.

The Office of the Secretary of Family and Social Services, as set out in IC 12-8-1-5, is responsible for coordinating the provision of technical assistance to each division for each of the following: (1) compiling program budgets; (2) fiscal performance; (3) management and administrative performance; and (4) program performance. The Secretary is also accountable for the following: (1) resolution of administrative, jurisdictional, or policy conflicts among the divisions; (2) coordination of the activities of each of the divisions with the other FSSA entities, the General Assembly, and other state agencies; (3) coordination of communication with the federal government and the governments of other states; (4) development and ongoing monitoring of a centralized management information system and a centralized training system for orientation and cross-training; (5) overall policy development and management of the State Medicaid Plan; (6) liaison activities with other governmental entities and private sector agencies; and (7) coordination of FSSA programs with related programs administered by the State Department of Health.

The FSSA administrative structure currently consists of: (1) the Office of Medicaid Policy and Planning (OMPP); (2) the Division of Family and Children (DFC); (3) the Division of Disability, Aging, and Rehabilitation Services (DDARS); (4) the Division of Mental Health (DMH); (5) the Division of Contract Management; (6) the Division of Organizational Development; and (7) the Division of Policy and Budget.

Additional study topics assigned by Legislative Council Resolution 1-97 include: (1) the feasibility of establishing homeless shelters (based on HB 1316-1997 and ESB 346-1997); (2) child labor laws (based on HCR 63-1997); and (3) various issues concerning children, particularly a system of integrated funding and the status of the contractual relationships between the contractor for Medicaid claims payment processing and the state (based on HCR 103-1997, HB 1580-1997, HB 1858-1997, HB 1860-1997, and ESB 163-1997).

III. SUMMARY OF WORK PROGRAM

The Committee met four times during the 1997 interim and five times during the 1998 interim.

The first meeting (August 21, 1997) was an organizational meeting. The Committee was briefed on the issues charged to the Committee. The Committee was provided background information on the administrative structure of FSSA from the Secretary of Family and Social Services. The Committee also received background testimony on two additional study topics charged to the Committee. Public testimony was also received.

The second meeting (September 9, 1997) was devoted to receiving presentations from the directors of the FSSA administrative support divisions and program divisions. Testimony pertained to the impact of the FSSA administrative structure on the performance of the program divisions and the impact of the administrative structure on the agency's ability to provide services.

The third meeting (October 14, 1997) focused on the impact of the FSSA administration on the actual delivery of social services. Testimony was received from providers and consumers of those services.

The fourth meeting (November 3, 1997) was for the purpose of Committee discussion for Committee recommendations and legislative proposals.

The fifth meeting (July 2, 1998), an organizational meeting for the second year of the Committee, was devoted to briefing the Committee on its statutory charge and to a presentation by the Secretary of FSSA. Public testimony was also taken regarding the administrative structure of FSSA.

The sixth meeting (July 28, 1998) was devoted primarily to: (1) the legislative oversight of administrative rulemaking; (2) long term care insurance as a state employee benefit; and (3) licensure requirements for social workers, mental health counselors, and correctional counselors.

The seventh meeting (September 3, 1998) involved more presentations and Committee discussions on the issues of: (1) the legislative oversight of administrative rulemaking; (2) long term care insurance as a state employee benefit; and (3) licensure requirements for social workers, mental health counselors, and correctional counselors. In addition, the Committee heard testimony on the County/State relationship in the financing of welfare expenditures.

The eighth meeting (September 29, 1998) was devoted to receiving presentations from the directors of the FSSA administrative support divisions and program divisions. Testimony pertained to the impact of the FSSA administrative structure on the performance of the program divisions and the impact of the administrative structure on the agency's ability to provide services. Public testimony was also taken. There was additional discussion on the issue of licensure requirements for social workers.

The ninth and final meeting (October 22, 1998) was devoted to consideration of Committee recommendations for legislation that included preliminary drafts on issues involving: (1) the legislative oversight of administrative rulemaking; (2) extension of the current administrative structure of FSSA; and (3) the grandfathering of certain state employees from the licensing requirements of IC 25-23.6. A draft of a proposed concurrent resolution urging the establishment of an interim study committee to investigate all aspects of child abuse in Indiana was also considered. Public testimony was also taken on the proposed recommendations.

IV. SUMMARY OF TESTIMONY

The Committee heard testimony from 43 individuals with several representing various organizations and government agencies.

Administrative Structure of FSSA

Ms. Kathy Davis, as Secretary of FSSA, briefed the Committee on the organizational changes to the Office of Secretary. SEA 76-1997, in addition to extending the tenure of the Family and Social Services Evaluation Committee, provided some additional flexibility in designing the administrative structure of FSSA.

Ms. Davis described the focus of family and children services as being: (a) welfare reform and moving recipients to work and self-sufficiency; (b) Healthy Families Program, which has proven to be a very

successful program for helping children at risk of abuse or neglect; and (c) services to children, in general, where funds previously spent on out-of-home services are now being spent on wrap-around services supporting the family. Ms. Davis also described the shift toward community services for the Mentally Retarded and Developmentally Disabled (MR/DD) population.

Ms. Davis described the following organizational changes to her office: the Office of Administration, the Office of Information and Technology Services, and the Office of Planning, Innovation, and Federal Relations were reorganized into the Division of Policy and Budget, Division of Organizational Development, and the Division of Contract Management. The Division of Policy and Budget has responsibilities for the budget, revenue enhancement, financial management, administrative claims, reports and statistics, policy, planning, and support. Over 70 funding streams support 170-plus programs. The division is to be instrumental in managing this flow of funds for maximum efficiency and effectiveness. The Division of Organizational Development has responsibility for the information systems, human resources, and training. The Division of Contract Management has responsibility for procurement, auditing, automated claims, administrative services, and local planning and support. Ms. Davis described the purpose of the changes was to better support FSSA in the provision of services in the following areas: (1) Community Planning - Where in the past, the state had been relatively prescriptive, FSSA was now working to develop the planning process allowing FSSA to concentrate on outcomes. (2) Computerization - The objective is to develop data systems to better work with communities and to aid in facilitating access and to help in developing and providing effective programs. (3) Contract management - The objective is to develop performance-based contracting focusing on outcomes across the divisions. (4) Policy and Budget - The objective is to focus on an approach to better blend funds where the program dollars follow the individual service plans.

Ms. Davis provided information on FSSA's guiding principles, operating measures and goals, the agency's work plan, budget summary, and organizational structure. Ms. Davis described the fundamental focus of the FSSA leadership team as the integration of services in a cost-effective manner and to provide quality services to clients. FSSA's objective is to create a system where services are provided close to home and where the program funding follows the individual. Ms. Davis listed four major priorities: (1) Welfare reform efforts - moving toward supporting working families in partnership with the Indiana Department of Workforce Development; (2) Child Development - looking at the number of services offered to children in collaboration with the State Department of Health and the Department of Education; (3) Expansion of Health Insurance through the Children's Health Insurance Program (CHIP) - integrating services and managing outreach efforts; and (4) Community services for people with disabilities and mental illness - shifting resources from institutional care to community-based care and developing community capacity for providing services.

Other FSSA staff who provided testimony regarding the administrative structure of FSSA included: (1) Ms. Venita Moore, currently Acting Secretary of FSSA; (2) Ms. Kathy Gifford, Assistant Secretary for OMPP; (3) Ms. Sharon Steadman, OMPP; (4) Mr. Jim Hmurovich, Director of the Division of Family and Children (DFC); (5) Ms. Janet Corson, Director of the Division of Mental Health (DMH); (6) Ms. Debra Wilson, Director of Disability, Aging, and Rehabilitative Services (DDARS); (7) Ms. Marjorie Gurnik, Director of the Division of Policy and Budget; (8) Ms. Joyce Rogers, Acting Director of the Division of Contract Management; and (9) Mr. Joe Pascucci, Director of the Division of Organizational Development. Each testified on their own division's duties and responsibilities and provided examples of the interrelationships between each of the support and program divisions within FSSA.

Mr. Hmurovich stated that the legislative intent of the original reorganization of the health and human services agencies was to bring the three agencies together (Welfare, Mental Health, and Human Services) to: (1) blend funding streams; (2) evaluate the rules made or eliminated by the federal government; and (3) provide services efficiently.

Ms. Marjorie Gurnik, Director of the Division of Policy and Budget, added that the key word to remember with regard to the three new divisions is "support". She stated that it is the responsibility of the new

divisions to support the priorities of the Secretary of FSSA and the directors of the program divisions and to work collaboratively to spend funds efficiently and effectively. Ms. Gurnik stated that many clients have overlapping needs across division boundaries. Ms. Gurnik asserted that the structure of FSSA can allow all to come together to develop systems and funding strategies to best provide services to clients. The issue is how to best blend dollars to give the local entities the opportunity and ability to develop systems to meet their own needs.

Steve McCaffrey, Indiana Mental Health Association, briefly reviewed the history of the reorganization of the social service agencies in Indiana as it relates to the mental health area. He stated that DMH was previously a division within the State Board of Health. But the desire to have department status for mental health issues led to the establishment of the Dept. Of Mental Health. Subsequently, the Dept. Of Mental Health was included as a division in the reorganization of the social services agencies into the Family and Social Services Administration. Mr. McCaffrey stated that the initial concerns with FSSA were whether DMH would have a diminished and less visible role within the new agency. He stated that FSSA did have growing pains and some concerns had come true. However, Mr. McCaffrey also stated he believed that the FSSA administration held beliefs similar to the Indiana Mental Health Association, that funding streams should be coordinated and that there be a focus on staff of FSSA.

Ms. Janet McIntyre, Mental Health Association of Marion County, discussed the DAWN Project as an example of what can happen as a result of coordination and collaboration. The DAWN Project is a pilot project initiated with a Robert Wood Johnson grant. The purpose of the project is to keep children and youth with emotional disorders in their own communities and to reduce stays in residential placement.

Mr. Jim Jones, Indiana Council of Community Mental Health Centers (ICCMHC), stated that during the previous eight years, there have been a multitude of priorities that have kept the state and the ICCMHC from accomplishing their goals with respect to FSSA and that there have been great experiences, as well as poor experiences. Mr. Jones stated that in the past there has been much focus on cost containment which resulted in a very thin personnel infrastructure within FSSA. With respect to DMH and the state hospital system, Mr. Jones stated, specifically referring to the Central State closing, that there has been a tremendous effort to provide a successful transition.

Mr. Galen Goode, Hamilton Community Mental Health Center, stated that he felt there were significant successes at FSSA. He stated that the agencies have set aside their individual agendas and sat down together to coordinate for the advantage of Indiana's citizens. He stated that good examples are the Medicaid Rehab Option and the closure of Central State Hospital. Mr. Goode stated that where, perhaps, FSSA has not provided sufficient policy direction has been in the areas of employment training and a better coordination with county governments with respect to services to children.

Ms. Judy Kendrick, stated that her organization, Family Works, is involved in family preservation services. With respect to changes in local service delivery after the establishment of FSSA, she stated that she did not believe there was much improvement. She stated that the appearance is that the system has merely been renamed and that there is still insufficient state funding for family preservation services. She also stated that, as a provider, it is difficult to get support and direction from FSSA in that it is more difficult to even know who to call at FSSA.

Ms. Clara Anderson, Executive Vice President of the Children's Bureau of Indianapolis, stated that in the last 10 years, some FSSA efforts have been successful, while others haven't been. Ms. Anderson described one concern regarding contracts issued for family preparation where bottlenecks have occurred. She described another concern regarding legal problems in the termination of parental rights, and in terms of consistency and post-adoption support.

Ms. Eileen Ahrens, Indiana State Association of County Welfare Administrators, described the delivery of services from the perspective of the local offices of the Division of Family and Children. She stated that there were many positive aspects including the following: (1) there is a change in culture at the local office

going from merely determining eligibility to trying to help families; (2) welfare reform is working; (3) payment accuracy is improving, especially with respect to the Food Stamp Program; (4) Child caring capacity is being increased; and (5) child support collections are increasing. Ms. Ahrens also described the following concerns: (1) the local offices are now working with more serious problems and progress will be slow; (2) there will need to be an effort on moving families who have low-paying jobs and who won't qualify for TANF into better paying jobs; (3) there is a need to improve payment accuracy; (4) further increasing capacity and quality of child care will require training of child care providers; and (5) efforts must be made to expand mandatory child support cooperation across programs. Ms. Ahrens added that we have come a long way in the last few years and the locals are involved in a range of areas like the Step Ahead process. She also stated that she would like to see more decentralization.

Mr. John Kaiser, Director of the Clark County Office of the Division of Family and Children, described the two basic principles of the child protection system: (1) protect children and (2) protect the integrity of the families. He also suggested that there were three necessary elements to be successful: (a) staff - FSSA worked very hard to reclassify staff with an accompanying salary increase which should lead to lower turnover; (b) funding - Jim Hmurovich and Cathy Graham have obtained additional funding through the IV-E Foster Care and IV-E Waiver programs that allows leveraging of federal dollars; and (c) coordination and communication among persons working within the child protection system, from top to bottom, which allows the appropriate blending of funds.

Ms. Sarah Taylor (Marion County Clerk), Ms. Marsha McSherry (Kosciusko County Clerk), and Mr. Bill Massert, (Vigo County Clerk) discussed the centralized child support system mandated by federal legislation stating that the problem with centralization of collection and distribution of monies is that the computer is in control. The county clerks stated that they would hope the federal government would allow linkages rather than require complete centralization of the system.

Ms. Sally Morris, ARC of Indiana, stated that she represents people with mental retardation and developmental disabilities (DD). She stated that the hopes and promises of the establishment of FSSA were: (1) that the reorganization would free up money for services at the local level - that hasn't happened; and (2) that the reorganization would have advisory committees at the bureau level; however, either input was made but not taken, or the dollars weren't there to do anything. Ms. Morris stated that the people that ARC of Indiana represents are provided services through the Bureau of Developmental Disabilities which is three steps down from the Secretary's position.

Mr. Costa Miller, Executive Director, Indiana Association of Rehabilitation Facilities, stated that rehabilitation facilities have lost a lot of ground between January of 1989 and January of 1997. However, the new administration is attacking the problems. Mr. Miller stated that the developmental disability system is on the brink of either a very positive move forward or a very disastrous set-back. He added that the long term care system in Indiana needs to be studied long and hard and that the CHOICE program is not solving problems for all people with developmental disabilities.

Ms. Rose Ann Rothman, Council of Volunteers and Organizations for Hoosiers with Disabilities (COVOH), stated that her organization supported the move to community-based services and that they were very pleased and impressed with FSSA and its accomplishments. She added that this has been an open administration and that FSSA has involved advocates and stakeholders, while creating choices for FSSA clients.

Ms. Carole Davis stated that her concern was the way the child abuse/child welfare system works in Indiana. Ms. Davis suggested that the child welfare system could be improved by disbanding FSSA. Ms. Davis commented that FSSA has had too much power.

Ms. Charlotte MacBeth, Indiana Hospital and Health Association, described two recent task forces involved in coordinating human services delivery. Ms. MacBeth described the "Dawn Project" (a program in Marion County that serves a target group of children with serious emotional, mental, and behavioral

disorders) and the Coordination Work Group/CHIP Advisory Panel (associated with the Children's Health Insurance Program).

Homeless Issues

Rep. Smith introduced the issue of homelessness and the funding of homeless programs. Rep. Smith stated that prevention is much better than intervention and that the homeless population is growing in this state. Rep. Smith indicated that he had in mind: (1) a comprehensive evaluation of the homeless problem; (2) a study to find out how the state can assist without displacing current initiatives; and (3) taking advantage of some federal initiatives that may occur.

Mr. Mark St. John provided the Committee background information about housing and homelessness in Indiana. He stated that the homeless look like Americans, the impact of which extends across age, gender, and racial lines. Mr. St. John further stated that a little fewer than 60,000 Hoosiers experience homelessness annually and that an additional 112,000 Indiana households are at risk of becoming homeless. Mr. St. John described the federal legislation in HR 217 that would consolidate HUD-administered Stewart B. McKinney funds and some discretionary dollars and block grant the funds out to the states.

Child Labor Laws

Rep. Foley introduced the issue of child labor laws to the Committee. Rep. Foley stated that the assignment of the issue to the Family and Social Services Evaluation Committee was fortunate in that this Committee was probably less polarized and contentious than the House Labor Committee. He stated that we all have the goal of not exploiting children, but that when a law isn't based on common sense, that people don't have respect for the laws, the government, or the legislature. The specific issue was whether children should be able to have multiple employer work permits even when the total hours permitted are not exceeded. Rep. Foley stated that the general issues that should be addressed are as follows: (1) How do we as a state issue work permits? (2) What is the common sense approach to work permits? (3) Is the system too archaic? and (4) The focus of the system should be on protection against exploitation while also helping children attain their goals.

Children's Issues

Ms. Kathy Williams described to the Committee the history of the issue concerning children. She stated that at the end of 1995, there was an attempt to discover how many kids were homeless. The survey found more than 520 children between the ages of 8 and 17 living on the streets and this was only part of the problem. These children disproportionately abuse drugs and alcohol. Homelessness, in part, is a result of a fragmented system of service delivery. Ms. Williams further stated that a number of children older than 12 years of age were found not to be receiving CHINS services when they should have been. There were also insufficient foster care placements and insufficient support for foster care homes. Ms. Williams also stated that these are probably on-going problems and that there is some action being taken by FSSA. She stated that these problems are issues of poverty, of sexual and physical abuse, and of fragmented funding and services. Ms. Williams stated that the Committee could take either of a couple of different approaches: (1) recommend to the legislature establishing a Children's Services Commission; or (2) take a wait-and-see attitude to see how the efforts mentioned above perform.

Mr. Lawrence Newman, Indianapolis, expressed concerns regarding the foster care system in Indiana and the explosive rise in property taxes largely due to the increase in foster care costs (increase of 842% in a four year period).

Ms. Tina Underwood, Fort Wayne, expressed concerns to the Committee regarding the child welfare system as it currently exists. She claimed that children are taken from homes and placed in foster care homes and that parents are not allowed their rights. Ms. Underwood stated that there are over 3 million

calls regarding child abuse and 60% of them are false reports. She stated that the state needs more highly qualified people and that the state needs a watch dog agency overseeing the Child Protective Services. She also stated that we need a system to work more efficiently and effectively for the children.

Ms. Susan Edwards, Fort Wayne, related to the Committee her experience with the child welfare agency that she has been dealing with for 14 years. Ms. Edwards stated that she was falsely accused of child abuse because her husband did not want to pay child support. She stated that children are in more danger with the child welfare agency than with the biological parents.

Ms. Mary Blocher testified to the Committee about her daughter, Casey. Casey, at the age of 21 months, was removed from the home by the county office of the Division of Family and Children (DFC) during a six-month time period when Ms. Blocher was hospitalized. The DFC action was a result of accusations regarding potential abuse by the father. However, Ms. Blocher stated that the abuse was never substantiated. Casey was in a total of 11 residential placements and had seven different DFC caseworkers over a 2 ½ year period.

Ms. Sally Nye, IARCCA, testified to the Committee representing 104 residential child care agencies across the state. She stated that she strongly supports the concept of a Commission, rather than an interim study committee, to study child abuse issues. She added that there were several positive changes that came out of the 1992 Commission on Abused and Neglected Children and Their Families. Ms. Nye stated that there were several important issues that could be studied by the commission including: (1) looking at the Division of Family and Children systems that are currently in place; (2) whether standards have changed for providing services; (3) impact on minority families and children; (4) impact of welfare reform initiatives on the abuse and neglect situation; (5) licensure of child caring institutions and foster homes; and (6) staff vacancies in FSSA, especially for licensing consultants.

Legislative Oversight of Rulemaking Process

Ms. Karen Davis, General Counsel for FSSA, described for the Committee the process by which administrative rules are adopted. Ms. Davis' testimony also included a description of the existing checks on agency rulemaking power and the challenges facing FSSA in the rulemaking process.

Long Term Care Insurance for State Employees

Ms. Mary Ann Hack, Director of the Indiana Long Term Care Insurance Program (ILTCI), described the ILTCI program and provided general information on the costs of long term care and the value of long term care insurance. She also provided information on long term care insurance as a benefit for state employees. There is no benefit option for state employees currently, but beginning later in 1998, the State Personnel Department will meet with the State employee unions to negotiate health care plan designs and offerings, including long term care insurance. Requests for Proposals for the benefits, including long term care insurance, will be issued during the summer of 1999 for contracts to be effective July 1, 2000. Ms. Hack stated that the intent is for the insurance premiums to be paid by the employees electing to purchase the coverage.

Grandfathering of Certain State Employees

Ms. Cordelia Lewis, AFSCME of Indiana, described HEA 1961 (1997) which mandates licensure for certain types of employees: social workers, mental health counselors, and correctional counselors. Ms. Lewis' primary concern was that HEA 1961 failed to grandfather or exempt current state employees and that this would result in the termination of employees. She added that more than 600 state employees could be affected by this provision.

Ms. Lauren Polite, FSSA, reported to the Committee that an estimated 232 individuals at FSSA in six different areas may be affected by the licensure requirements of HEA 1961. She also stated that child

abuse/child welfare caseworkers, and adoption and family preservation caseworkers were not subject to these requirements.

Mr. Eric Scroggins, Deputy Director, State Personnel, stated that upon the review of the Health Professions Bureau's proposed rules which assist in the implementation of HEA 1961-1997, approximately 600 state workers are impacted by the proposed rules and the provisions of HEA 1961-1997.

County/State Relationship in Financing Welfare Expenditures

Nick Pasyanos, Association of Indiana Counties, provided committee members with information on the use of county funds with regard to the county welfare levy. Mr. Pasyanos stated that this information was also provided at the Citizen's Commission on Taxes meeting in October 1997.

John Von Arx, Marion County Auditor, stated that the relationship between the state and counties is good. Mr. Von Arx stated that there is an inherent flaw in the financing of welfare programs; the body setting welfare policy is not the same body that is paying the bills for welfare programs. Mr. Von Arx suggested shifting the responsibility of financing to the policy making body.

V. COMMITTEE FINDINGS AND RECOMMENDATIONS

There was no quorum of the membership available at the final meeting of the Committee on October 22, 1998. Consequently, there were no votes taken on the proposed legislative recommendations. However, an informal consensus was reached among those members present that the proposals should move forward. The following legislative proposals were considered.

(1) Legislative Oversight of Administrative Rulemaking

PD 3394, as originally presented to the Committee, would delay the effective date of a rule, other than an emergency rule, until after the General Assembly has had an entire regular session to review the rule, unless the General Assembly provides for an earlier effective date. The bill draft also requires the Administrative Rules Oversight Commission (AROC) to review rules, including emergency rules, that are filed with the Secretary of State.

Suggested changes to PD 3394 included: (1) a rule would take effect unless the committee recommends to and action is taken by the General Assembly during the following legislative session; (2) deleting SECTION 2 of the draft; and (3) providing that the Legislative Council review the current system and recommend a system for legislative oversight of the rule-making process.

(2) Extension of the Administrative Structure of FSSA

PD 3489 would extend the current administrative structure of the Office of Secretary of Family and Social Services until July 1, 2002. (Current law provides for expiration on July 1, 1999.). The bill creates the eight-member FSSA Evaluation Committee which is to study issues relating to the administrative structure of FSSA. The bill also requires FSSA to implement methods to facilitate the payment of providers and to report to the Legislative Council regarding such methods by July 1, 1999.

No suggestions for changes to this draft were made by the members present.

(3) Licensure Requirement for Certain State Employees

PD 3491, as presented to the Committee, grandfathers certain state employees from the licensing requirements in IC 25-23.6. The bill requires the Social Worker, Marriage and Family Therapist, and

Mental Health Counselor Board to certify an individual as a mental health counselor, social worker, or clinical social worker as appropriate if the individual: (1) is employed by FSSA, the Department of Correction, or the State Department of Health as of June 30, 1999; and (2) is employed within certain specified job classifications.

The Committee, by consensus, decided the grandfathering date should be January 1, 1999 (rather than June 30, 1999).

(4) Establishment of a Commission to Study Child Abuse

SC 2001, as presented to the Committee, was a draft of a proposed concurrent resolution urging the establishment of an interim study committee to investigate all aspects of child abuse in Indiana. There was a consensus of the members present to recommend that a commission be formed rather than an interim study committee. The commission would be generally modeled after the Commission on Abused and Neglected Children and Their Families as established by HEA 1035 (1992), but would be staffed by the Legislative Services Agency.

WITNESS LIST

Eileen Ahrens, President, Indiana State Association of County Welfare Administrators

Clara Anderson, Childrens' Bureau of Indianapolis

Mary Blocher, Shelbyville, IN

Janet Corson, Director, Division of Mental Health, FSSA

Carole Davis, Evansville, IN

Karen Davis, General Counsel, FSSA

Kathy Davis, Secretary, Family and Social Services Administration

Susan Edwards, Fort Wayne, IN

Rep. Ralph Foley, Indiana General Assembly

Galen Goode, Hamilton Community Mental Health Center, Terre Haute, IN

Cathy Graham, Deputy Director, Office of Family Protection/Family Preservation, FSSA

Marge Gurnik, Director, Division of Policy and Budget, FSSA

Mary Ann Hack, Director, Indiana Long Term Care Insurance Program

James Hmurovich, Director, Division of Family and Children, FSSA

Jim Jones, Indiana Council of Community Mental Health Centers

John Kaiser, Director, Clark County Office, Division of Family and Children, FSSA

Judy Kendrick, Director, Family Works

Cordelia Lewis, Director, Politics and Legislation, AFSCME of Indiana

Charlotte MacBeth, Indiana Hospital and Health Association

Bill Massert, Vigo County Clerk

Steve McCaffrey, President, Indiana Mental Health Association

Janet McIntyre, Executive Director, Mental Health Association of Marion County

Marsha McSherry, Kosciusko County Clerk

Costa Miller, Indiana Association of Rehabilitation Facilities

Vaneta Moore, Director, Division of Contract Management, FSSA

Sally Morris, ARC of Indiana

Lawrence Newman, Attorney, Indianapolis, IN

Sally Nye, Indiana Association of Residential Child Care Agencies

Joseph Pascucci, Director, Division of Organizational Development, FSSA

Nick Pasyanos, Association of Indiana Counties

Joyce Rogers, Acting Director, Division of Contract Management, FSSA

Lauren Polite, Legislative Liaison, FSSA

RoseAnn Rothman, Council of Volunteers and Organizations for Hoosiers with Disabilities

Eric Scroggins, Deputy Director, Indiana Department of Personnel

Mark Shublack, Association of County Welfare Directors

Sharon Steadman, Director of Managed Care, Office of Medicaid Policy and Planning

Rep. Vernon Smith, Indiana General Assembly

Mark St. John, Indiana Coalition on Housing and Homeless Issues

Sarah Taylor, Marion County Clerk

Tina Underwood, Fort Wayne, IN

John Von Arx, Marion County Auditor

Kathy Williams, Indiana Coalition for Human Services

Debra Wilson, Director, Division of Disability, Aging, and Rehabilitative Services, FSSA